## FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C., 20549

ES	OMB APPROVAL			
E COMMISSION	OMB Number: 3235-			
20549	Expires: May 31,200 Estimated average burde			
_	Estimated average burde			
)	hours per response			

SEC MAIN DIRECTION 3

# FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					
ŀ					

143733

Name of Officing Whicheck if this is an amendment and name has changed, and indicate change	¢.)
Exchange of Common Stock in Film Finances, Inc. for Membership Interests in Film F	Finances, LLC
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section	
Type of Filing:	
A, BASIC IDENTIFICATION DATA	JUN 1-2 2008
1. Enter the information requested about the issuer	THOMSON REUTERS
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	ILIOIMOUA KESIEK
Film Finances, LLC	
Address of Executive Offices (Number and Street, City, State, Zip C	Code) Telephone Number (Including Area Code)
9000 Sunset Blvd., Suite 1400, Los Angeles, CA 90069	310-275-7323
Address of Principal Business Operations (Number and Street, City, State, Zip (if different from Executive Offices)	Code) Telephone Number (Includios Access)
Brief Description of Business	12010 0000 1990 0000 0000 0000 0000 0000
Provision of completion guarantees for motion picture productions	
	(100k) THE COLOR WAS COLOR WAS COLOR WAS COLOR
Type of Business Organization	08052034
	other (please specify):
business trust limited partnership, to be formed limited	ed liability company
Month Year	
Actual or Estimated Date of Incorporation or Organization: [0]4 [0]8 Actual [ Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for	<b>⊸</b> i
CN for Canada: FN for other foreign jurisdiction)	

### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fi th Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new fiting must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securit	es of the issuer
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and	
• Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partn	er
Full Name (Last name first, if individual) Ransohoff, Steven	
Business or Residence Address (Number and Street, City, State, Z p Code) c/o Film Finances, LLC, 9000 Sunset Blvd., Suite 1400, Los Angeles, CA 90069	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partn	er
Full Name (Last name first, if individual) Woolner, Kurt	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Film Finances, LLC, 9000 Sunset Blvd., Suite 1400, Lcs Angeles, CA 90069	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partn	er
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partn	÷r
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partn	÷r
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partners	er
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Cwner Executive Officer Director General and/or Managing Partne	:r
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	

	B. INFORMATION ABOUT OFFERING									t			
1	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes	No <b>W</b>			
	Answer also in Appendix, Column 2, if filing under ULOE.								<u>L</u>	E.			
2.									\$ N/	Α			
,									Yes	No			
3. 4.	21,									R			
	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful	Full Name (Last name first, if individual)												
Bu	siness or	Residence	Address (N	Sumber and	d Street, C	ity, State, 7	(ip Code)	<u> </u>					
Na	me of As	sociated Bi	roker or De	aler				<del></del> -					
Sta	tes in Wh	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)	***********					····	□ A1	l States
	AL	AK	AZ	AR	CA	<u>C</u>	CT	DE	DC	FL	GA	HI	ID
	II,	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT)	NE SC	NV SD	(NH) (TN)	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Ful	l Name (	Last name	first, if ind	ividual)		<del>_</del>				-			
Rus	sings or	Residence	: Address (1	Viinsher on	d Street C	Sity State	Zin Cada)			· · · · · · · · · · · · · · · · · · ·			
130.		residence	. Auditess (1		d Sirect, C	ny. State, i	rap coder						
Nai	me of As:	sociated Bi	oker or De	aler									
Sta	tes in Wh	ich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)	•••••						□ \( \begin{align*} \lambda align*	1 States
	AL	AK	AZ	AR	CA	<u>(O)</u>	CT	DE	DC	FL	GA	111	ID
	MT	IN NE	IA NV	KS [NH]	KY NJ	<u>I.A.</u> NM	ME NY	MĎ NC	MA	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX		VT	VA	WA	WV	WI	WY	PR
Ful	I Name (	Last name	first, if ind	ividual)									
Bus		Residence	Address (1	Vumbar an	d Street C	Styl Ctata	Zin Coda)						
	3111033 01		- Address (1	vamber an	a sireer. e		ziji Code)						
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)													
	AL AK AZ AR CA CO CT DE DC FL GA								HI	ID			
	IL IN IA KS KY LA ME MD MA MI MN MT NE NV NH NJ NM NY NC ND OH OK							MS OR	MO PA				
	RI	ŞC	SD	TN	TX		VT	VA	WA	WV	WI	WY	PR

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already

	already exchanged.  Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	-	s 0.00
	Equity		s 0.00
	Common   Preferred	3	\$
	Convertible Securities (including warrants)	s 0.00	0.00 \$
	Partnership Interests		\$ 0.00
	Other (Specify: Limited Liability Company Membership Interests		s 1,250,000.00
		\$ 1,250,000.00	§ 1,250,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ	Ψ
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	:	Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$ 1,250,000.00 \$ 0.00
	Non-accredited Investors		
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		S_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		S0.00
	Printing and Engraving Costs		\$_0.00
	Legal Fees		§_0.00
	Accounting Fees	<del>-</del>	\$ 0.00
	Engineering Fees	_	\$ 0.00
	Sales Commissions (specify finders' fees separately)		S 0.00
	Other Expenses (identify)		\$_0.00
	Total	Ċ	c 0.00

	C. OFFERING PRICE, NUMI	BER OF INVESTORS, EXPENSES AND	USE OF PROCEEDS					
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C — proceeds to the issuer."	Question 4.a. This difference is the "adj	isted gross	\$1,250,000.00				
5.	each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of	licate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for the of the purposes shown. If the amount for any purpose is not known, furnish an estimate and seek the box to the left of the estimate. The total of the payments listed must equal the adjusted gross beeeds to the issuer set forth in response to Part C — Question 4.b above.						
			Payments to					
			Officers, Directors, & Affiliates	Payments to Others				
	Salaries and fees		s <u>0.00</u>	S_0.00				
	Purchase of real estate			S_0.00				
	Purchase, rental or leasing and installation of mac and equipment	hinery	\$_0.00	s0.00				
	Construction or leasing of plant buildings and fac			S_0.00				
	Acquisition of other businesses (including the val- offering that may be used in exchange for the asse issuer pursuant to a merger)	ue of securities involved in this		✓ \$_583,333.00				
	Repayment of indebtedness			S_0.00				
	Working capital			s0.00				
	Other (specify):			S_0.00				
				s				
	Column Totals			☑ S 583,333.00				
	Total Payments Listed (column totals added)		✓ \$_1,250,000.00					
		D. FEDERAL SIGNATURE						
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acci	nish to the U.S. Securities and Exchang	ge Commission, upon writter					
Issi	uer (Print or Type)	Signature	Date					
Fil	m Finances, LLC	KN	5-29-	UY				
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)						
Kur	l Woolner	Manager						

-- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)